



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600001

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: SE-FLAN INC.

DOING BUSINESS AS SEAN PATRICK'S

ADDRESS 494 ELECTRIC AVE.

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: FLANNAGAN,
COLLEEN

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY CONCRETE BLOCK BLDG WITH TWO ENTRANCES AND EXITS ON ELECTRIC AVE AND ONE ENT/EXIT ON PIERCE AVE CONTAINING ONE DINING ROOM, BAR ROOM, KITCHEN, BOILER ROOM AND STORAGE ROOM

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600004

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: RNDC Company

DOING BUSINESS AS RG Scooters

ADDRESS 84 LAKEFRONT

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: Newman, Rhonda

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY WOOD FRAME BLDG WITH TWO ENTRANCES AND EXIT CONTAINING A LOUNGE, DINING ROOM, KITCHEN AND STORAGE ROOM

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

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EMPLOYER IDENTIFICATION NUMBER:

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By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600009

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: AMERICAN GRAFFITI INC

DOING BUSINESS AS

ADDRESS 113 SUMMER ST.

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: JENNISON, TODD TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FIRST FLOOR OF A TWO STORY BLDG CONSISTING OF TWO ROOMS AND KITCHEN AND
A STORAGE AREA WITH ENTRANCE AND EXIT

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600010

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DONNELLY'S TAVERN, INC.

DOING BUSINESS AS

ADDRESS 43 SUMMER ST. & YOUNGS

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: DONNELLY,
JOHN D.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY FRAME BLDG HAVING 3 ENTRANCES AND EXITS ON SUMMER ST, ONE
ENTRANCE AND EXIT ON YOUNGS RD. COMBINATION DINING ROOM AND BARROOM,
ONE DINING ROOM, CELLAR FOR STORAGE AND HEATING, FOUR REST ROOMS AND ONE
KITCHEN

I hereby certify and swear under penalties of perjury that:

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SIGNED BY

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EMPLOYER IDENTIFICATION NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600011

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: 449 CORPORATION

DOING BUSINESS A LAKEVIEW CLUB

ADDRESS 449 WHALOM RD.

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: NORTON,
EDWARD

TYPE OF LICENSE: General on
premise

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO STORY WOOD FRAME BLDG WITH TWO ENTRANCES IN FRONT AND ONE EXIT IN REAR. LARGE BAR AND LOUNGE AREA WITH SEATING FOR 45 TO 50 PEOPLE WITH SEPARATE TOILET AND WASHING FACILITIES

I hereby certify and swear under penalties of perjury that:

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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600013

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: VASTA, INC

DOING BUSINESS AS LUNENBURG LIQUORS

ADDRESS 433 ELECTRIC AVENUE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: HALKIADAKIS,
ANASTASIA

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY BLDG WITH ONE ENTRANCE AND EXIT. SIDE ENTRANCE FOR DELIVERIES
AND ONE ROOM FOR SALES AND DISPLAY. ONE STORAGE ROOM AND CELLAR USED
FOR STORAGE. ADDITION USED FOR STORAGE AND HAVING A SEPARATE ENTRANCE
AND EXIT

I hereby certify and swear under penalties of perjury that:

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EMPLOYER IDENTIFICATION NUMBER:

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LICENSE NUMBER: 063600014

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: GENGHIS, INC.

DOING BUSINESS AS CENTRE PIZZA & VARIETY

ADDRESS 1353 MASS AVE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: WERNICK,
ANASTASIA

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600016

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: VICTORY DISTRIBUTORS, INC

DOING BUSINESS AS HANNAFORD FOOD & DRUG

ADDRESS 333 MASSACHUSETTS AVE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: BISOL, ANGELO

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY CEMENT BLDG WITH ENTRANCE AND EXIT ON ELECTRIC AVE AND
CONTAINING A ROOM FOR SALES AND DISPLAY AND STORAGE AREA

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
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SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600020

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: COSIMI CORP.

DOING BUSINESS AS THE BOOTLEGGER

ADDRESS 50 MASS AVE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: COSIMI, ALLAN S. TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

1.5 STORY BLDG WITH FUNCTION ROOMS DOWNSTAIRS; DINING ROOM, BAR, LOUNGE & KITCHEN AREA. 2nd floor has one dining room and ALSO OUTSIDE DECK

I hereby certify and swear under penalties of perjury that:

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EMPLOYER IDENTIFICATION NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600021

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: J & M GOLF, INC.

DOING BUSINESS AS MAPLEWOOD GOLF COURSE

ADDRESS 994 NORTHFIELD ROAD

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: BENEVENTO,
JOSEPH

TYPE OF LICENSE: Restaurant

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO ROOMS AND TWO RESTROOMS ON FIRST FLOOR, CELLAR FOR STORAGE

I hereby certify and swear under penalties of perjury that:

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3. the premises are now open for business (If not explain below)

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DATE:

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EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600024

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: CAROL A. BAKER & HENRY A. BAKER

DOING BUSINESS AS BAKER'S WHALOM VARIETY

ADDRESS 423 ELECTRIC AVE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01452

MANAGER:

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

A VARIETY STORE CONSISTING OF DISPLAY AREA, STORAGE AREA AND OFFICE

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600027

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: MARY L. PADULA

DOING BUSINESS AS THE HARLEY HOUSE

ADDRESS 909 MASSACHUSETTS AVE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER:

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

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DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600030

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: ELENA'S GOURMET GROCERY INC.

DOING BUSINESS AS ELENA'S GOURMET GROCERY

ADDRESS 1 MAIN STREET

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: CHRISTOPHER,
ELENA

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

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DATE:

TELEPHONE NUMBER:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600031

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: JK WATERFRONT INC.

DOING BUSINESS A "ON THE ROCKS"

ADDRESS 96 LAKEFRONT DRIVE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: RICKER, KENNETH
J.

TYPE OF LICENSE: General on
premise

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ADD OUTSIDE FENCED-IN DINING AREA.

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600032

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: RED PEPPER INC

DOING BUSINESS AS IXTAPA MEXICAN CANTINA

ADDRESS 308 MASSACHUSETTS AVENUE

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: CAMACHO, JESUS TYPE OF LICENSE: Restaurant
VERA

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

RECEPTION AREA, LOUNGE AREA, 1 ENTRANCE, 2 EXITS, 4 DINING ROOMS, KITCHEN,
MENS AND WOMENS RESTROOMS.

I hereby certify and swear under penalties of perjury that:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600033

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: KHAN MOHIUDDIN

DOING BUSINESS A HADWEN PARK MARKET

ADDRESS 1 MAIN STREET

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: MOHIUDDIN, KHA TYPE OF LICENSE: Package Store
N

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600037

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: ASIAN IMPERIAL INC.

DOING BUSINESS AS ASIAN IMPERIAL GARDEN

ADDRESS 324 ELECTRIC AVENUE - UNIT 3

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: CHEN, KE FENG

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

APPROX. 2303 S/F W/ DINING ROOM, SUSHI BAR, KITCHEN, STORAGE AREA & HANDICAP
MEN/LADIES BATHROOM

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600038

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: S&K Restaurant, Inc

DOING BUSINESS A Bangkok Hill Restaurant

ADDRESS 177 Massachusetts Ave

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: Vivatyukan,
Thosaphol

TYPE OF LICENSE: Restaurant

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

first floor with dining room, kitchen area, one handicapped restroom, one entrance and exit and porch in front

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
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Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600039

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: B & H Corporation

DOING BUSINESS A Mickey Shea's

ADDRESS 324 Electric Ave

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: Blood, Kyle

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

end unit of lakeview plaza consisting of one ladies room, one entrance and exit. Kitchen, cooking area
bar area, dining area with pool table, dart board, seating for approx 100

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600041

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: MELENDEZ MAGNA, INC

DOING BUSINESS AS DARIO'S

ADDRESS 308 MASSACHUSETTS AVE.

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: GONZALEZ, ENIO TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

2500 SQ. FT. WITH A DINING AREA, COOKING AREA, WITH A BRICK OVEN, STORAGE AREA, MENS ROOM, LADIES ROOM, AND ONE EXIT IN THE FRONT AND REAR.

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 063600043

CITY OR TOWN LUNENBURG

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: CENTRAL MASS GARDEN CENTER

DOING BUSINESS AS CENTRAL MASS GARDENS

ADDRESS 621 CHASE ROAD

CITY/TOWN: LUNENBURG

STATE: MA

ZIP CODE: 01462

MANAGER: CAPONE, KEITH

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ENTRANCES ARE LOCATED AT THE FRONT, SIDES AND REAR OF BUILDING...AMPLE
PARKING IS LOCATED IN OUR PRIVATE LOT, LOCATED IN THE FRONT OF OUR STORE

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

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